FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED

2012 NOV -5 AM 9: 35

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NAME OF COMMITTEE (in 1)	iull)	(Check if no is changed)		Example: If typing over the lines.	g, type	12FE4M	C baice use a	EHTER	
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(Check if address is changed)		DELRAY	BEACI	-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<sub>i</sub> FL <sub>j</sub>	33482	    -  -	
			CITY	,	:	STATE	ZIF	CODE	
COMMITTEE'S E-MAIL		6 (Please provide on UnitedSta	_		Cauçus	es@y	ahoo.c	om, , , ,	
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COMMITTEE'S WEB F	PAGE ADD	RESS (URL)							
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2. DATE ÎO									
3. FEC IDENTIFICATION NUMBER C									
4. IS THIS STATEM	ENT 🛛	NEW (N)	OR	AMENI	DED (A)				
I certify that I have ex	amined this	Statement and to	the best of r	my knowledge a	and belief it is	true, corre	ct and comple	te.	
Type or Print Name of	Treasurer	RICHAR	D KEV	INSTO	٧				
Signature of Treasurer	-6	Ruff)			D	ate Î	0° ′ 29°	<sup>′</sup> 2012	
NOTE: Submission of fa		us, or indimplete info NY CHANGE IN INF						of 2 U.S.C. §437	
Office Use Only						tect:		FORM 1 ed 02/2009)	